

### RECEIVED

FEB 04 2015

S.D. SEC. OF STATE

### State of South Dakota Campaign Finance Disclosure Statement

3.U. 3E	C. OF STATE				
Full Name of Committee:	10m 1	Jelson CAM	PAIGN (	COMMITI	TEE
10m Nelson		Foggyno	te@rus	hmore.co	n
Committee Chair, Treasurer, Candidate		E-Mail			
275 CADDY D	RIVE				
Committee Street Address					
Spenefish	SD	57783			
Committee Postal Address					
10m Nelson	ſ	605-641-	0177	605-584	1-2600
Name of Person Making Report		Daytime Telephone #	ŧ	Evening Telephone #	
If Candidate Committee, please note office	peing sought, and Distri	ct # (If applicable)	Political pa	rty affiliation (if any)	
			_	_	
If Ballot Question Committee, Ballot Questic	n number or letter.		Supporting?	Opposing?	
				_	
Type of Campaign Statement:					

M

Year-End

#### **VERIFICATION OF PERSON MAKING REPORT**

Pre-General

Pre-Convention

(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer respon-

sible for filing to a civil penalty per day for each day of that the statement remains delinquent.

Date

Pre-Primary

Signature of Treasurer

**County, municipal and school** candidates file this statement with the person in charge of the local election.

Supplement

Termination

Amendment

**Statewide PACs, political party, ballot question and other committees** file this statement with the Secretary of State's Office.

Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 p: 605-773-3537 f: 605-773-6580 e-mail to kea.warne@state.sd.us

Fax and e-mail images must contain the signature(s).

## INCOME

#### **Direct Contributions from Individuals**

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributions from Individuals	Amount
Enter total of all unitemized contributions (\$100 or less each from individuals) here:	\$
	Line item A1

Itemized Contributions from Individuals Enter all itemized contributions (\$100.01 or more each from individuals) below: Residential (Street) Address including city, state and zip Name **Amount** \$ Itemized Contributions - Enter total of all itemized contributions (\$100.01 or more each from individuals): \$

Line item A2

## **Direct Contributions from Organizations**

An organization is defined as any corporate entity, partnership, association, club, labor union, or any group organized in a corporate form that is not defined as a political committee or political party. ONLY PAC's and Ballot Committee Questions may recieve direct contributions from organizations.

Name	Residential (Street) Address including city, state and	d zip	Amou
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
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		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
nized Contributions -	Enter total of all itemized contributions from organizations:	\$	

### **Direct Contributions from Political Parties**

Contributions from Political Parties				
Name	Residential (Street) Address including city, state and zip		Amount	
		\$		
		\$		
		\$		
		\$	•	
		\$		
Enter total of all contributi	ons from Political Parties here:	\$		

Line item C1

## **Direct Contributions from In-State Political Action Committees**

Name	Residential (Street) Address including city, state and zip	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
	I ons from South Dakota Political Action Committees or South Dakota Candidate Committees here:	\$

## **Direct Contributions from Out-of-State Political Action Committees**

Contributions from Federa	al Political Action Committees	
Name	Filing Website Address	Amount
all		\$
		\$
		\$
		\$ •
		\$
		\$
		\$
		\$
		\$
Enter total of all contributions	from Federal Political Action Committees or Out-of-State Candidate Committees here:	\$

Line item D2

### **Direct Contributions from Candidate Committees**

Name	Residential (Street) Address including city, state and zip	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
nter total of all contribution	s from Candidate Committees here:	\$

#### **In-Kind Contributions**

Description	l and services and the estimated fair market value  Name and residential address	Eati	matad
Description	Name and residential address	ESU	mated value
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
Enter total of all estimated in-kind co	ntributions here:	\$	

Line item F1

#### Other Income

Refunds, rebates, interest earned, sale of property, or other income which is not a direct contribution.			
Source of Income	Description of Income (i.e. raffles and auctions income)	tion of Income (i.e. raffles and auctions income)	
		\$	
		\$	
		\$	
Enter total of other income here:	·	\$	

Line item G1

### **Establishing and Administering Committee/Solicitation Costs**

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds	Amount
	\$
	\$
	\$
Enter total here:	\$

Line item H1

# **EXPENDITURES**

## **Operational Expenditures**

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Campaign Expenses	Amount
Advertising	\$
Consulting	\$
Interest	\$
Postage	\$
Printing	\$
Rent	\$
Salaries	\$
Telephone	\$
Travel	\$
Utilities	\$
List other expense items below (i.e. donations to organizations, gifts, meals, fundraising expenses):	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
nter total expenditures here:	\$

Line item X1

#### **Contributions Made to Candidates and Committees**

Name of Candidate or Committee		Amount
	\$	
	\$	
	\$	
	\$	
	\$	
	\$ .	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	*
Enter total of contributions to candidates or committees here:	\$	

Line item X2

## **Debts and Obligations Owed by this Committee**

Owed to/Creditor's Name	Nature of obligation	Address	Amount
			\$
			\$
			\$ 
			\$
Enter total debt owed by committee here:			\$

<sup>\*</sup>This would include loans that have been made to this committee (i.e. personal loan to committee).

Line item X3

#### **Loans Owed to this Committee**

Report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

Name of recipient of loan, including address.	ount of loan made uring the reporting period	t of loan repaid g the reporting period	Balance of loan at the end of the reporting period
	\$	\$	\$ •
	\$	\$ 341	\$
	\$	\$	\$
Enter total amount of loans owed to committee here:	\$	\$	\$

<sup>\*</sup>This would include loans to other committees.

Line item Y1

Line item Y2

Line item Y3

# **SUMMARY OF INCOME AND EXPENDITURES**

	of cash and cash equivalents on hand, if any, at the beginning of the re		\$ 65.7
		Income	Expenses
	Candidate's Personal Contribution to Own Campaign	\$ .	
Income:			
	Unitemized Contributions (A1)	\$ .	
	Itemized Contributions (A2)	\$ .	
	Contributions from Organizations (B1)	\$ .	
	Contributions from Political Parties (C1)	\$ .	
	Contributions from In-State PACs (D1)	\$ .	
	Contributions from Out-of-State or Federal PACs (D2)	\$ .	
	Contributions from Candidate Committees (E1)	\$ .	
	Other Income (G1)	\$ .	
	Expenditures from an external source to establish a committee (H1)	\$ .	
Expenditures			
	Operational Expenditures (X1)		\$ .
	Contributions to Candidates and Committees (X2)		\$ .
	Debts and Obligations Owed by the Committee (X3)		\$ .
Loan Activity			
	Monetary loan made to this Committee during reporting period (Y1)	\$ .	
	Monetary loan repaid to this Committee during reporting period (Y2)		\$ .
Λm	ount on hand at the end of the reporting period:	\$ /	

In-Kind Contributions (F1) which are not included in your ending balance \$\_\_\_\_\_

\*Note: You cannot end the reporting period with a negative balance.

County, municipal and school candidates file with the person in charge of the local election.